



## New Jersey Department of Children and Families Policy Manual

Manual:	CP&P	Child Protection and Permanency	Effective Date:
Volume:	III	Case Management	
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### **Purpose 11-10-97**

Supplemental Security Income (SSI) is a program designed to provide financial assistance to blind and disabled people of any age and persons over the age of 65 meeting certain eligibility requirements of the program.

SSI is not the same as Social Security's Retirement, Survivors, Hospital Disability Insurance (RSHDI). Money for SSI payments comes from general funds of the U.S. Treasury, while Social Security benefits are paid from contributions/payroll deductions of workers, employers, and self-employed people. There are no limits on the amount of money or property one can have and still receive Social Security benefits (an entitlement). A financial determination is completed by the Social Security Administration, however, to establish a person's eligibility for SSI benefits. Social Security funds are not used to make SSI payments.

See also Federal Benefits, [CP&P-IX-F-1-250](#).

### **Administration 1-5-95**

The Supplemental Security Income (SSI) program is administered by the Social Security Administration (SSA). The Social Security Administration (federal government) contracts with agencies in the fifty states to make disability determinations at the State level. In New Jersey, the Division of Disability Determinations, under the New Jersey Department of Labor, holds that contract. The Division of Disability Determinations evaluates reports from physicians, treating professionals, hospitals, clinics, institutions, and any other evidence describing a claimant's condition in order to render a decision. If additional examinations are needed, the Social Security Administration pays the costs.

### **Eligibility for SSI Benefits 9-8-2009**

Eligibility for SSI is based on an individual's inability to work due to a physical or behavioral/mental health impairment. An individual is considered disabled under Social

Security if he or she is unable to do any kind of work for which he or she is suited, and the disability is expected to last for at least one year or to result in death.

In addition to the documented impairment, there are financial restrictions which affect eligibility. Information regarding the child's income and assets, as well as the income and assets of the parents, is needed to make a determination of eligibility.

A child cannot receive SSI payments and simultaneously be a recipient of WFNJ TANF. If the child is eligible for both programs, the parent or guardian can choose the one which best meets the needs of the family. Likewise, an agency sponsoring a child cannot claim both SSI benefits and Title IV-E reimbursement on behalf of the child.

The Social Security Administration publishes a handbook, Disability Evaluation Under Social Security, a listing which describes symptoms, signs, and/or laboratory findings of physical and behavioral/mental health problems that are severe enough to render an individual disabled. If the symptoms, signs, or laboratory findings associated with a child's condition are the same as or equal to the listing, he or she is considered disabled for SSI purposes.

The Handbook is updated periodically, to keep physicians and other health professionals up to date with changes in the disability program under Titles II and XVI of the Social Security Act. The handbook is located at <https://www.socialsecurity.gov/disability/professionals/bluebook/>

## **Partial Listing of Impairments**

**1-5-95**

A partial listing of impairments for which a child may be found eligible for SSI benefits, listed here in categorical order as found in the Disability Evaluation Under Social Security handbook, includes:

1. Growth Impairments
  - A. Failure to thrive
  - B. Premature infancy, as evidenced by:
    - premature infant (37 weeks or less), weighing less than 1200 grams (2 pounds, 10 ounces) at birth, until attainment of one year of age; or
    - premature infants weighing at least 1200 grams but less than 2000 grams at birth, who are at least four weeks small for gestational age, until attainment of one year of age.
2. Musculo Skeletal Disorders

- A. Juvenile Rheumatoid Arthritis
  - B. Osteoarthritis
  - C. Osteomyelitis
  - D. Spina Bifida
    - Meningocele
    - Meningomyelocele
  - E. Spinal Disorders
    - Kyphosis
    - Scoliosis
    - Spinal Fracture
  - F. Fractures (non healing)
  - G. Amputations
3. Special Senses and Speech Disorders
- A. Hearing Impairments
    - Deafness
  - B. Visual Impairments
    - Blindness
    - Congenital Cataracts
    - Retinopathy
  - C. Speech and Language
    - Inability to understand and sustain speech in an age appropriate manner
4. Respiratory Disorders
- A. Asthma with frequent attacks

- B. Bronchitis with frequent attacks
- C. Cystic Fibrosis
- 5. Cardiac Disorders
  - A. Arrhythmia
  - B. Congestive Heart Failure
  - C. Cyanotic Congenital Heart Disease
  - D. Hypertension/High Blood Pressure
  - E. Rheumatic Heart Disease
- 6. Digestive Disorders
  - A. Malnutrition
  - B. Obesity
  - C. Obstruction
    - of bowel
    - of esophagus
  - D. Ulcerative Colitis
  - E. Regional Enteritis
  - F. Chronic Liver Disease
- 7. Genito-Urinary Disorders
  - A. Chronic Renal Disease (kidney failure)
    - Renal Transplant (kidney transplant)
    - Renal Dialysis
- 8. Hemic (Blood) and Lymphatic System Disorders
  - A. Anemia

- B. Hemophilia
  - C. Leukemia
  - D. Sickle Cell Disease
  - E. Thrombocytopenia
9. Endocrine Disorders
- A. Adrenal Cortex Impairments
    - Hyperfunction (Cushing's Syndrome)
    - Insufficiency (Addison's Disease)
  - B. Diabetes Insipidus
  - C. Hypoglycemia
  - D. Thyroid Disorders
    - Hyperthyroid
    - Hypothyroid
    - Turner's Syndrome
  - E. Pituitary Impairments
10. Multiple Body System Impairments
- A. Inherited/Congenital Multiple Body System Dysfunction:
    - Down Syndrome
    - Phenylketonuria (PKU)
    - Tay-Sachs Disease
    - Trisomy D or E
    - Cyclopia
    - Anencephaly

- Cri du Chat Syndrome
- Thymic Dysplastic Syndrome
- B. HIV Positive/AIDS with opportunistic infection
- C. Fetal Alcohol Syndrome
- D. Neonatal Infections
  - Cytomegalic Inclusion Disease
  - Herpes Encephalitis
  - Rubella Syndrome
  - Toxoplasmosis
- 11. Neurological Disorders
  - A. Seizure Disorders
    - Epilepsy (Grand Mal or Petit Mal)
  - B. Brain Tumors
  - C. Motor Dysfunction (due to any neurological disorder involving two or more extremities)
  - D. Cerebral Palsy
  - E. Muscular Dystrophy
  - F. Poliomyelitis (Polio)
  - G. Peripheral Neuropathy
- 12. Mental Impairments
  - A. Organic Mental Disorders
  - B. Schizophrenic, delusional, schizoid effective, and other psychotic disorders
  - C. Mood Disorders

- D. Mental Retardation
  - E. Anxiety Disorders
  - F. Somatoform (hypochondria), eating and tic disorders
    - Anorexia
    - Bulimia
    - Tourette Syndrome
  - G. Personality Disorders
  - H. Psychoactive Substance Dependence Disorders (drug and/or alcohol abuse)
  - I. Autistic Disorder and other pervasive developmental disorders
  - J. Attention deficit hyperactivity disorder
  - K. Developmental and emotional disorders of newborn and infants (birth to age one)
13. Neoplastic Disorders (Cancer)
- A. Hodgkin's Disease
  - B. Metastatic Cancer (cancer that has spread)
  - C. Cancers not controlled by prescribed therapy (cancer that is non responsive to chemotherapy)
  - D. Recurrent cancer after radical surgery or irradiation
  - E. Sarcoma

## **Medicaid Coverage                      2-6-2012**

A child who is eligible for SSI is automatically and categorically eligible for Medicaid. The Social Security Administration is responsible for processing the Medicaid eligibility of these children. Children eligible for Medicaid through the SSI program are identified on the Medicaid Status File by a Program Status Code of 20. SSI eligible children in out-of-home placements through CP&P are also eligible for Medicaid through the Medicaid Code 60 Program. CP&P is responsible for Code 60 eligibility processing and does not utilize a child's SSI Code 20 Program. See [CP&P-V-A-2-200](#).

When an SSI child returns to his or her family from an out-of-home placement, the Worker returns the child's HBID card to the parent or guardian. CP&P then terminates the child from the Medicaid Code 60 Program.

**Identification of CP&P Clients (Children) Potentially Eligible for SSI Benefits**  
**9-8-2009**

See [CP&P-IX-F-1-250](#), Federal Benefits.